

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Lofgren for Congress

Full Name (Last, First, Middle Initial)

**A. Rolla Group**

Mailing Address 1220 4th Street NW, #1

Date of Disbursement

M M	D D	Y Y Y Y
09	02	2015

City	State	Zip Code
Washington	DC	20001

Purpose of Disbursement  
Fundraising Consultant

Amount of Each Disbursement this Period

6500.00
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Transaction ID : D767630

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. SunTrust Merchant Services**

Mailing Address PO Box 6600

Date of Disbursement

M M	D D	Y Y Y Y
09	11	2015

City	State	Zip Code
Hagerstown	MD	21741

Purpose of Disbursement  
Credit Card Processing

Amount of Each Disbursement this Period

487.69
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Transaction ID : D768830

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Contribution Solutions, LLC**

Mailing Address 123 E. San Carlos St., #531

Date of Disbursement

M M	D D	Y Y Y Y
09	08	2015

City	State	Zip Code
San Jose	CA	95112

Purpose of Disbursement  
Event Coordination

Amount of Each Disbursement this Period

2000.00
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Transaction ID : D767811

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8987.69